DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Corrected

Facility Information

Facility Name: COUNTRY TERRACE MENOMONIE (0009880)

Address: 1916 TALEN ST, MENOMONIE, WI 54751

License Status: REGULAR

Licensed/Certified/Registered 02/01/2004

Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

Survey ID: 0096546 End Date: 02/07/2006 Type: STANDARD Purpose: SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10010046 Served 03/10/2006

Deficiencies Cited Subject Area Subject Area Verified

83.06(5)(a) INCOMPETENT NOT ADMITTED OVER 16 BED

83.16(1) ADMISSIONS AGREEMENT

Survey ID: 0092037 End Date: 02/24/2004 Type: STANDARD Purpose: SURVEY

Results: LICENSE/CERT/REGISTRATION ISSUED

Survey ID: 0096317 End Date: 08/07/2003 Type: STANDARD Purpose: SURVEY

Results: SECOND PROBATIONARY LICENSE ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 03/06/2006 SOD #10010046 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION